03-19-01

PTO/SB/05 (11-00)

Please type a plus sign (+) inside this box ——

Approved for use through 10/31/2002. OMB 0651-0032
U.S Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. HRA/12340

First Inventor John Vilkinofsky

Title VOLUME STABILITY CONTROL FOR...

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Express Mail Label No. EL517857555US

APPLICATION ELEMENTS			DDRESS TO: Bo	x Patent Applica			
	cerning utility patent application cont			ashington, DC 2			
	form (e.g., PTO/SB/17) 7. CD-ROM or CD-R in duplicate, large table or duplicate for fee processing) Computer Program (Appendix)						
2. Applicant claims s See 37 CFR 1.27	aims small entity status. 8. Nucleotide and/or Amino Acid Sequence Submission (1.27. (if applicable, all necessary)			Submission			
3. Specification (preferred arrangement)	[Total Pages 11]	Computer Readable Form (CRF)					
- Descriptive title	e of the invention b. Specification Sequence Listing on:						
	 Cross Reference to Related Applications Statement Regarding Fed sponsored R & D 			i. CD-ROM or CD-R (2 copies); or			
- Reference to se	- Reference to sequence listing, a table,			ii. 🔲 paper			
or a computer program listing appendix - Background of the Invention			c. Statements verifying identity of above copies				
Brief Summary of the Invention Brief Description of the Drawings (<i>if filed</i>)			ACCOMPANYING APPLICATION PARTS				
- Detailed Descri			. Assignment Pape	rs (cover sheet &	& document(s))		
- Claim(s)	Claim(s)Abstract of the Disclosure			37 CFR 3.73(b) Statement Power of			
-	1	¬ 1	(when there is an	σ ,	→ Attorney		
4. X Drawing(s) (35 U	J.S.C. 113) [Total Sheets L	$\frac{1}{2}$ $\frac{1}{2}$	Information Discl	·	Copies of IDS		
5. Oath or Declaration	[Total Pages 0	11	Statement (IDS)/		Citations		
a. Newly exec	uted (original or copy)	1	13. Preliminary Amendment				
b. Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed) 14. Return (Show			(Should be specia	fically itemized)	,		
	TION OF INVENTOR(S) atement attached deleting inventor(s)	1	Certified Copy of (if foreign priority	Priority Docume is claimed)	ent(s)		
named in t	the prior application, see 37 CFR	1	Request and Cer	tification under 3	35 U.S.C. 122		
1.63(d)(2) and 1.33(b)			(b)(2)(B)(i). Appli or its equivalent.	cant must attach	form PTO/SB/35		
6. X Application Data	Sheet. See 37 CFR 1.76	1	7. Other				
18 If a CONTINUING APPLI	ICATION, check appropriate box, an	d supply the i	equisite information below	v and in a prelim	inary amendment.		
or in an Application Data She	eet under 37 CFR 1.76:	. د ان زرماطهد	- 		,,		
Continuation	Divisional Continuation-in-part	t (CIP)	of prior application No				
Prior application information.	Examiner		Group Art Unit				
For CONTINUATION OR DIVISI Box 5b. is considered a part of	IONAL APPS only: The entire disclosur f the disclosure of the accompanying o	e of the prior continuation of	application, from which an o divisional application and	oath or declaratio is hereby incorpo	n is supplied under rated by reference.		
The incorporation can only be	relied upon when a portion has been i	nadvertently o	nitted from the submitted a	pplication parts.			
	19. CORRESE		DDRESS				
Customer Number or Bar Co	ode Label (Insert Customer No or A		el here) or	Correspondence a	nddress below		
Name	Rankin, Hill, Porter & Clark	LLP					
	925 Euclid Avenue, Suite 700						
Address							
City	City Cleveland St		Ohio	Zip Code	44115-1405		
Country	U.S.A.	Telephone	(216) 566-9700	Fax	(216) 566-9711		
Name (Print/Type)	David E. Spaw	F	egistration No. (Attorne	ey/Agent) 347	732		
Signature Date 03/16/2001							
<u> </u>	TO THE POOL						

Burden Hour Statement: This form is estimated to take 0.2 hour to complete Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

03/16/2001

Date

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)

Signature

	(
	_

Complete if Known				
Application Number				
Filing Date	Herewith			
First Named Inventor	John Vilkinofsky			
Examiner Name				
Group Art Unit				
Attorney Docket No.	HRA/12340			

METHOD OF PAYMENT	FEE CALCULATION (continued)			
The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES			
1 indicated fees and credit any overpayments to:	Large Entity Small Entity Fee Fee Fee Fee Fee Fee Description	Fee Paid		
Deposit Account	Code (\$) Code (\$)			
Number	105 130 205 65 Surcharge - late filing fee or oath			
Deposit Account Name	127 50 227 25 Surcharge - late provisional filing fee or cover sheet			
Charge Any Additional Fee Required	139 130 139 130 Non-English specification			
Under 37 CFR 1 16 and 1 17 Applicant claims small entity status	147 2,520 147 2,520 For filing a request for ex parte reexamination_			
See 37 CFR 1 27	112 920* 112 920* Requesting publication of SIR prior to Examiner action			
2. Payment Enclosed: Check Credit card Money Order Other	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action			
C Order	115 110 215 55 Extension for reply within first month			
FEE CALCULATION	116 390 216 195 Extension for reply within second month			
1. BASIC FILING FEE	117 890 217 445 Extension for reply within third month			
Large Entity Small Entity Fee Fee Fee Fee Description	118 1,390 218 695 Extension for reply within fourth month			
Code (\$) Code (\$)	128 1,890 228 945 Extension for reply within fifth month			
101 710 201 355 Utility filing fee	119 310 219 155 Notice of Appeal			
106 320 206 160 Design filing fee	120 310 220 155 Filing a brief in support of an appeal			
107 490 207 245 Plant filing fee	121 270 221 135 Request for oral hearing			
108 710 208 355 Reissue filing fee	138 1,510 138 1,510 Petition to institute a public use proceeding			
114 150 214 75 Provisional filing fee	140 110 240 55 Petition to revive - unavoidable			
SUBTOTAL (1) (\$) 0	141 1,240 241 620 Petition to revive - unintentional			
2. EXTRA CLAIM FEES	142 1,240 242 620 Utility Issue fee (or reissue)			
Fee from Extra Claims below Fee Paid	143 440 243 220 Design issue fee			
Total Claims 18 -20** = 0 X = 0	144 600 244 300 Plant issue fee			
Independent 1 - 3** = 0 x = 0	122 130 122 130 Petitions to the Commissioner			
Claims Multiple Dependent = 0	123 50 123 50 Petitions related to provisional applications			
	126 240 126 240 Submission of Information Disclosure Stmt			
Large Entity Small Entity Fee Fee Fee Fee Fee Description	581 40 581 40 Recording each patent assignment per property (times number of properties)			
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	146 710 246 355 Filing a submission after final rejection (37 CFR § 1 129(a))			
102 80 202 40 Independent claims in excess of 3	149 710 249 355 For each additional invention to be examined (37 CFR § 1.129(b))			
104 270 204 135 Multiple dependent claim, if not paid	The second secon			
109 80 209 40 ** Reissue independent claims over original patent				
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	169 900 169 900 Request for expedited examination of a design application			
SUBTOTAL (2) (\$) 0	Other fee (specify)	0		
**or number previously paid, if greater; For Reissues, see above	Reduced by Basic Filing Fee Paid SUBTOTAL (3)			
SUBMITTED BY	Complete (if applicable)			
Name (Printl Type) David E. Spaw	Registration No. (Attorneyl Agent) 34,732 Telephone (216) 5	66-9700		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.